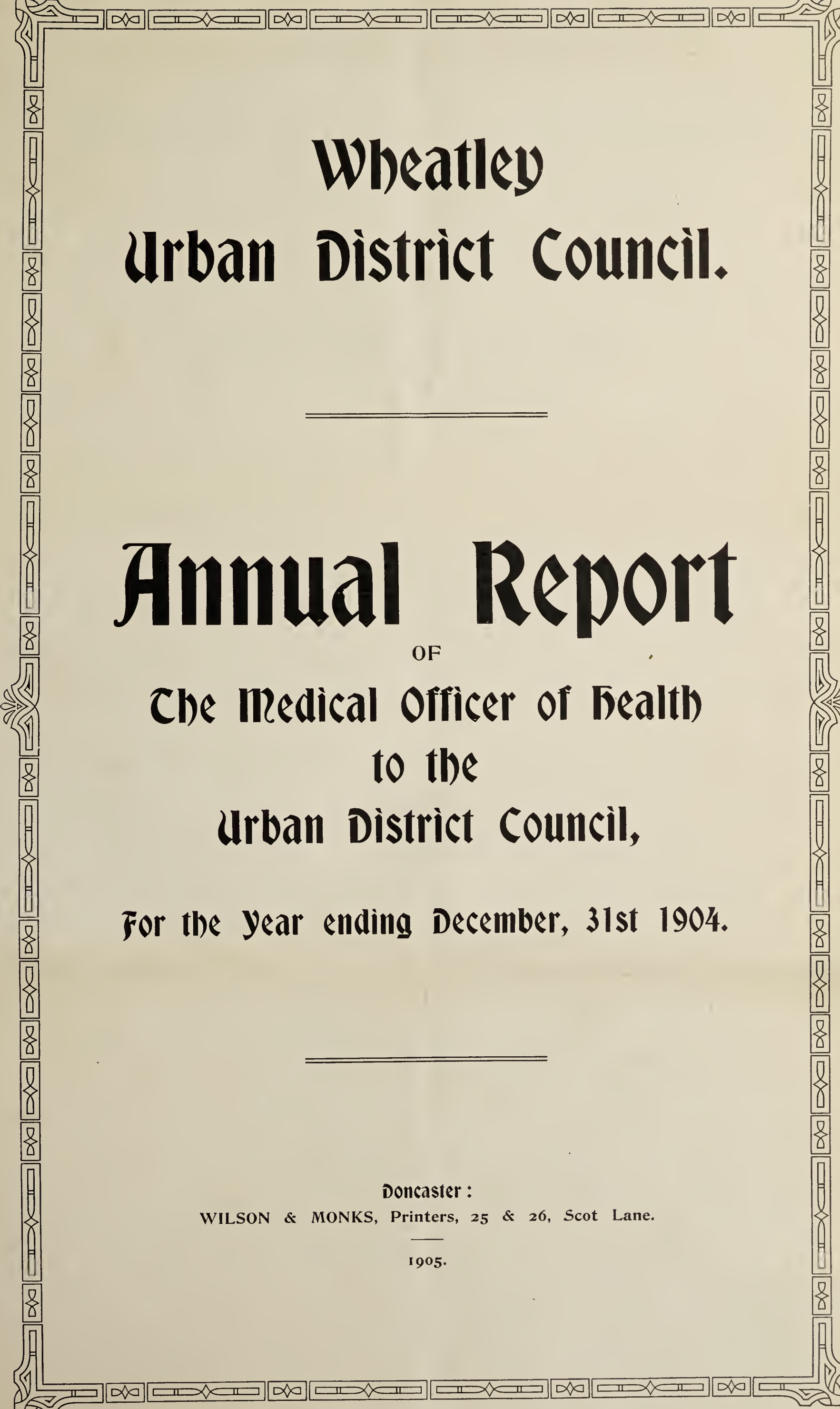




Wheatley Urban District Council.

Annual Report

OF

The Medical Officer of Health
to the
Urban District Council,

For the Year ending December, 31st 1904.

Doncaster :

WILSON & MONKS, Printers, 25 & 26, Scot Lane.

1905.

Wheatley Urban District Council.

REPORT FOR THE YEAR 1904.

To the Chairman and Councillors.

Gentlemen,

I have the honour to present to you my Report on the health of the Urban District of Wheatley during the year 1904, prepared in accordance with the Regulations and Requirements of the Local Government Board.

I am,

Your obedient Servant,

D. LECHMERE ANDERSON,

Medical Officer of Health.

PUBLIC HEALTH OFFICE,

DONCASTER, *1st February, 1905.*



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ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH,

FOR THE YEAR 1904.

PHYSICAL FEATURES AND GENERAL CHARACTER OF DISTRICT.

The Urban District of Wheatley is situated to the north of the Borough of Doncaster. It is bounded on the north by the parish of Bentley-with-Arksey, on the south by Doncaster, and on the east by the parish of Kirk Sandall.

The district is purely residential. No industries of any importance exist, the majority of the inhabitants finding employment in Doncaster. Of the 1,284 acres forming the parish, the built-upon area, enclosed by Thorne Road, Broxholme Lane, Wheatley Lane, Morley Road, and Avenue Road, amounts to about 83 acres. The area of the district (exclusive of area covered by water) is 1,276 acres, giving an average density of 3.25 persons to the acre. For the built-upon portion, the average density approaches 50 persons per acre.

THE GEOLOGICAL FORMATION

Of the subsoil throughout is of sand and gravel, which renders the foundation of the houses nearly always dry. The highest surface level is about 79 feet above the Ordnance Datum, and the lowest is 34, near the river Don.

POPULATION.

The population of the district in 1891 was 1,795. Ten years later, when the census of 1901 was taken, the population numbered 3,579, an increase of 1,784, or practically one hundred per cent. In calculating the population for 1904, the estimate is formed upon this increase, and yields an estimated population at the middle of the year of 4,158.

Considerable as this increase is, there is no reason in the case of Wheatley for believing that it will be found very far from approximately correct, although calculations founded upon a ten-yearly census are from many causes always unsatisfactory, and frequently unreliable. The importance of a more frequent census is now generally admitted.

DEATH RATE.

The Death Rate of Wheatley has always been extremely low, the average rate for the past nine years being 11.7 per 1,000. The lowest recorded rate was 9.1 in 1898, and the highest 13.6 in 1900. This year, I am pleased to state, the same satisfactory low death rate has been recorded; the death rate, 10.1 per 1,000, being the second lowest in the past 10 years. The actual number of deaths which occurred in Wheatley was **40**, a figure which, for an estimated population at the middle of the year of 4,158, gives a death rate of 9.6, but, as two deaths of residents occurred in Public Institutions outside the district, the total is raised to 42, making the rate 10.1, as mentioned above.

The death rates of the neighbouring Urban Districts are as follows:—The Borough of Doncaster 15.7, Balby-with-Hexthorpe 15.2, and the combined township, which had an estimated population at the end of the year of 41,663, 15.0 per 1,000.

BIRTH RATE.

In 1903, a larger number of births than had ever been recorded occurred in Wheatley, the actual number being 126, which yielded the excellent birth rate of 31.6 per 1,000. This year the number has sunk very considerably, only **106** births have been registered, a figure which has not been so low since 1899, when only 104 births occurred. In 1899 the estimated population being only 3,263, so that the birth rate was at a comparatively high figure, but this year, Wheatley having an estimated population of 1,000 more, the rate has fallen very considerably. The Birth Rate for 1904 is 25.4, and is the lowest rate recorded during the decade. Only in three years out of the past nine has the rate fallen below 30 per 1,000, the average rate for the past nine years standing at no less a figure than 30.9 per 1,000. The record rate for the district was 34.5 in 1900.

The **excess** of births over deaths was **66**. In 1903 the excess of births over deaths was 80, and in 1902, 65.

Of the 106 births, 49 were males and 57 females. In 1903, 67 male and 59 female children were born. If the figures for these two years are added together, the rather peculiar coincidence will be found that exactly the same numbers of the two sexes have been born within twenty-four months, namely, 116 boys and 116 girls.

The Birth Rates for the neighbouring Urban District for the year are:—Doncaster 24·7, Balby-with-Hexthorpe 28·0, and the combined Township 25·4.

INFANTILE MORTALITY.

The number of Deaths of children under 12 months of age during the previous years has been upon an average 13, equivalent to a proportion of 136·6 deaths for every 1,000 children born.

This year the number of deaths of children was below the average, only 11 being recorded, giving an infantile mortality rate of 103·7 per 1,000 births. In former reports I have pointed out that an annual death rate of 100 per 1,000 is regarded as unavoidable from many causes, no matter how good the surroundings, however maternal care is exercised, from the fact that a certain number of infants are premature, and cannot all survive; that others are born with malformations and other defects, which soon terminate their existence, and that there is also a large proportion who will succumb to one or other of the many ailments to which infancy is liable. Granting, then, that an annual death rate among infants of 100 per 1,000 is unavoidable, and that anything above that may be held to be preventable, our rate for the past twelve months must be regarded as satisfactory.

Vigorous efforts are being made in many towns to reduce the annual infantile mortality bill. The principal measures adopted embracing the circulation of cards of instruction as to the feeding of infants; the employment of special female assistants, who give verbal instructions in feeding, and many matters concerning home sanitation; the establishment of sterilised milk depôts, at which milk specially prepared for infants can be obtained; the improvement of slums, and increased attention to scavenging.

Comparing the infantile mortality rates of the three divisions of the township, the figures are:—

WHEATLEY	103·7
DONCASTER	163·5
BALBY-WITH-HEXTHORPE	159
THE COMBINED TOWNSHIP	156

ZYMOTIC DEATH RATE.

The term Zymotic Death Rate covers the death rate from the seven principal Zymotic Diseases, namely, small-pox, measles, scarlatina, diphtheria, whooping cough, "fever" (typhus, simple continued, and enteric), and diarrhœa. The rate is a popular but very unsafe standard of the health of a community, as it is liable to great fluctuation, according to the epidemic prevalence of one or other of the diseases mentioned. It may, however, be safely held that a high death rate from enteric fever, diphtheria, or diarrhœa, implies a defective sanitary state, if accidental or temporary causes, such as climatic conditions, or accidental contamination of milk or water, can be excluded. During the past year the number of deaths from zymotic diseases was extremely low, only three deaths being recorded. Of these, 1 was from measles and 2 were from diarrhœa, yielding the low zymotic death rate for 1904 of 0·8 per 1,000. The rate for 1903 was 1·0 per 1,000.

The zymotic death rates of the divisions of the township are as follows:—

WHEATLEY	0·8 per 1,000
DONCASTER	1·2 „
BALBY-WITH-HEXTHORPE	1·1 „
COMBINED TOWNSHIP	1·2 „

TUBERCULAR DEATH RATE.

During 1904 only **4** deaths were registered from Tubercular causes, of which 2 were due to Phthisis, and 2 from other Tubercular Diseases, yielding a tubercular death rate of less than 1 per 1,000, namely, **0·95**. This is by far the most satisfactory report I have yet had the pleasure of making with regard to this type of disease.

In 1903 nine deaths were registered as due to Tubercular Disease, giving a tubercular death rate of 2·2. In 1902 the rate was 2·3, and in 1901 1·4.

During this year the handbill calling attention to the danger of spitting, referred to in my last year's report as having proved efficacious in repressing to very considerable extent the disgusting habit of spitting in public streets, was again widely circulated. The handbill runs as follows :—

“ Prevention of Consumption.”

“ Notice as to Spitting.”

“ Do not Spit. This disgusting habit causes others to take Consumption.”

In addition to this handbill, the Bye-Law, passed by the West Riding County Council against spitting in public places, was also largely advertised in the following public handbill :—

“ Important Public Notice.”

“ Attention is called to the Bye-law printed below, by which Spitting is now Prohibited in certain public places (*e.g.*, Railway Carriages, Tram Cars, Omnibuses, Public Halls, Waiting Rooms, and Places of Entertainment).

“ The principal object of the Council in framing the Bye-law is, the Prevention of Tuberculosis (Consumption), and the following are some of the reasons for its adoption :—

“ No one can develop Consumption except after taking in the characteristic germ or seed of the disease.”

“ The main Channel for the spread of these germs of infection is the spit or sputum of those already suffering.

“ Such sputum often contains countless numbers of active germs, and these do not die immediately, but may retain their vitality for a long time, especially in dark corners or ill-ventilated places.

“ When the sputum becomes dry these seeds of the disease are scattered about as dust, and, being invisible to the naked eye, they are liable to be inhaled by healthy persons, or swallowed with food or drink.

“ In order to protect the public from this danger, it is necessary to forbid ALL careless spitting in enclosed places of public resort. There is no unnecessary hardship in this, because those who cannot refrain from spitting are chiefly those whose sputum is most dangerous. Such persons should adopt means for the safe disposal of their sputum.

“ The Public are earnestly invited to assist in securing the due observance of the Bye-law.”

Copy of Bye-law referred to.

“ No person shall spit on the floor, sides, or surface of any public carriage, or of any public hall, public waiting room, or place of public entertainment, whether admission thereto be obtained upon payment or not. Any person offending against this Bye-law shall be liable to a fine not exceeding £5.”

As the Corporation of Doncaster has also adopted a similar Bye-law, and as the West Riding County Council Bye-law is in operation in Balby-with-Hexthorpe, the law against spitting in certain public places is now operative in all parts of the township. So far no prosecutions have taken place under it.

The population of Wheatley is as yet too small to give a table affording a reliable idea of the prevalence of Tubercle in its district alone, but by following the method of former years, and taking the deaths from the Combined District under my care, having a population of over 40,000, its prevalence may be readily manifested.

COMBINED TOWNSHIP.**DONCASTER, BALBY-WITH-HEXTHORPE, AND WHEATLEY.**

Deaths at various Age-periods from Tubercular Diseases in the year 1904, with average for preceding 3 years, compared with deaths from Miasmatic Diseases, and from all causes.

	Year.	NUMBER OF DEATHS.					Proportion of Deaths from Tubercular Diseases to Deaths from all causes
		Phthisis.	Other Tubercular Diseases.	All Tubercular Diseases.	All Miasmatic Diseases.	All Causes.	
All Ages.	1904	38	17	55	55	628	1 : 11·4
	Average 1901-3.	46	24	70	66	615	1 : 8·7
Infant Period 0-5 years.	1904	0	9	9	40	221	1 : 24·5
	Average 1901-3.	5	18	23	49	238	1 : 10·3
School Period 5-15 years.	1904	3	3	6	2	17	1 : 2·8
	Average 1901-3.	2	2	4	3	21	1 : 5·2
Adolescent Period 15-25 yrs.	1904	9	3	12	4	32	1 : 2·6
	Average 1901-3.	8	1	9	1	25	1 : 2·7
Mature Period 25-65 yrs.	1904	24	2	26	5	192	1 : 7·3
	Average 1901-3.	30	3	33	8	185	1 : 5·6
Post-Mature Period 65+ years.	1904	2	0	2	4	166	1 : 83
	Average 1901-3.	1	0	1	5	146	1 : 146

From the above table it will be seen that a very considerable decrease occurred in the number of deaths from Tubercular Disease during the past twelve months, when compared with the average number of cases of the previous three years. Altogether, 55 deaths, 38 from Phthisis, and 17 from other Tubercular causes, being registered, in contrast with an average number of 70 deaths, 46 from Phthisis, and 24 from other Tubercular Diseases. This improvement is more fully manifested, when it is seen that while in former years 1 death out of every 8 deaths was due to Tubercular Disease, in 1904, only 1 death out of 11 was ascribed to this type of disease.

The principal decrease occurred in the infant period (0-5 years). No deaths from Phthisis, and 9 from other Tubercular Disease being registered last year, in contrast with 5 and 18 as the respective averages for the former years, and whereas 1 death out of every 10 was certified as due to Tubercle in 1904.

A considerable increase is shown in the school period of life (5-15 years), when out of 17 deaths, which occurred from all causes, no less than 6, or $\frac{1}{3}$ of the number, were due to this cause alone. In the adolescent period (15-25 years), a considerable increase is also shown, 12 deaths having been registered, in contrast with an average number of 9 in former years. At the mature (25 to 65) and post-mature periods of life, considerable decreases are shown in the number of deaths due to this disease.

Taken as a whole, the chart shows a very marked decrease in the occurrence of fatal cases of Tubercular Disease, a disease against which, and this is being abundantly made manifest, it is possible to wage very successful war.

No deaths were registered as due to Alcoholism; in 1903 one death was due to this cause, and one death also occurred in 1902. From Cancer no less than 3 deaths were certified. As was to be expected, all of the deaths occurred in middle age. In 1903 only one death occurred from cancer, but 1902 gave 4 deaths. Fatal Diseases of the Heart show a very considerable increase, no less than 7 have occurred, in contrast with 3 in 1903. All of the deaths from this cause occurred in elderly people.

No fatal accidents happened during the past 12 months; in 1903, 4 deaths from accident were registered. Deaths from Suicide are again conspicuous by their absence. Pneumonia, of which 3 fatal cases were noted in 1903, gave no deaths this year, but from Bronchitis 4 deaths arose, in contrast with 1 in 1903. Further particulars of the various causes of death, with the ages at death, are to be found in Table III. in the Appendix.

VOLUNTARY NOTIFICATION OF PHTHISIS.
(CONSUMPTION OF THE LUNGS.)

The Voluntary Notification of Phthisis came into force in this district on January 1st, 1903. The notification being confined to cases of Tubercular disease of the lungs. For such information the customary notification fee is paid, and, in order to obviate any difficulty which might arise over questions of diagnosis, the presence of Tubercle Bacilli in the sputum, as determined by bacteriological examination, is the basis of such notification. For such examination the County Council Authority provides facility free of charge to all practitioners.

Only 1 case of the disease was notified during the year. On receipt of the notification the house is visited and inspected, and necessary measures of disinfection or other precautions ascertained. As the utmost pains are taken to act in complete agreement with the notifying practitioner, and as the examination of the house, surroundings, &c., cannot but act in the patient's benefit, it is to be hoped that a much more active response will be made to the Council's request to practitioners to notify the disease.

INFECTIOUS DISEASE.

During 1904 17 cases of Infectious Disease were notified by Medical Practitioners under the Infectious Diseases (Notification) Act. During 1903, 12 cases were notified, and in 1902, 32. For the sake of comparison, the following table is appended:—

DISEASE.	1901.			1902.			1903.			1904.		
Diphtheria	4	...	...	4	...	...	6	...	...	3		
Scarlatina	7	...	...	15	...	...	2	...	...	7		
Typhoid	5	...	...	7	...	...	2	...	...	5		
Erysipelas	2	...	...	6	...	...	1	...	...	0		
Small-pox	0	...	...	0	...	...	1	...	...	2		
	—			—			—			—		
Totals	18	...	...	32	...	...	12	...	...	17		
	—			—			—			—		

From the above table it will be seen that the principal increase has been in **Scarlatina** cases, seven cases having occurred, in contrast with two in the preceding twelve months. It has been a matter of considerable surprise to me that more cases of this disease have not occurred, as an epidemic of Scarlatina of considerable magnitude prevailed in Doncaster during the last two months of the year. That we have so far escaped so easily is, in my opinion, to the credit of the Staff of the Public School. I have noticed with pleasure the very careful attention paid to the health of scholars attending school, and their rigid insistence of the exclusion of children coming from infected homes who, not themselves suffering from infectious disease, may yet have come in contact with it.

The importance of such exclusion should be more generally understood, as parents too frequently endeavour to return children to school before sufficient time has elapsed to insure that the disease may not be actively propagated by them. It is rarely possible to provide effectual separation of the sick from the healthy within the homes of children attending the public elementary schools, and, for that reason, the exclusion from school of all children of an infected household becomes apparent; first, because such children might attend school while suffering from the disease in a latent form, or at an unrecognised stage; and, secondly, because it is known that infection may attach itself to, and be conveyed by the clothes of a person living in an affected atmosphere, even though the person himself be unaffected.

When the source of infection is removed (either by the removal of patient to hospital, or by recovery, or death of the patient), re-admission to school should not be allowed till (the house, bed, and bedding having been disinfected) twelve days have elapsed without any further case of sickness occurring, and then only upon the certificate of the medical attendant, or from the Medical Officer of Health.

That infection may attach itself to and be conveyed by the clothes of a person living in an affected atmosphere was strongly manifested in two of the Scarlatina cases, which occurred in one house, in the last month of the year.

In this instance, a female relative went to nurse children suffering from Scarlatina outside the district on the 14th of December, returning home on the 24th of the same month. On the 30th, or six days later, two children in her own home in Wheatley showed signs of the disease.

Of the other cases of Scarlatina, two occurred in one house, so that altogether there were five outbreaks of the disease within the year.

The cases were all benignant in type.

In connection with Scarlatina, I think it is right to emphasize the importance of shielding children from infection, as I find many parents consider it a disease from which escape is so little possible that it is hardly worth while taking the most trivial precautions to avoid it; indeed, I have heard of healthy children having been introduced into an infected room that they might acquire the disease in times of mild epidemics, forgetting altogether that the most trivial types may give rise to the disease in a most malignant form.

It would do much to dispel such criminal ignorance, were it generally known that "there is a distinct double gain in shielding a child from infection during the first years of his life. Every year of escape after the fifth **leaves him less and less susceptible**, until finally he **becomes almost immune**, and, secondly, if he should be attacked, **every year that the attack is delayed reduces the danger to life**, and also the risk of formidable complications that may become chronic and disabling, even if not immediately fatal."

Of the seven cases, three were treated at home, and four removed to hospital. Two of the hospital cases have been discharged, while the other two were still under treatment at the close of the year.

The condition of the houses was thoroughly examined, with the result that no insanitary conditions were found to exist.

SMALL-POX, which was epidemic in the West Riding during 1903, continued to prevail all through the past year. It is gratifying to note that, at the period of writing, the number of cases reported begins to show considerable signs of decrease. Wheatley has been remarkably free from the disease, only three cases (one in 1903, and two in 1904) having occurred within the past two years. Of the two cases occurring this year, both occurred in the first month of the year. The first undoubtedly acquired infection from the patient's brother—the case which occurred in December, 1903. In the second case, the cause of infection was not ascertained. Both patients were removed to hospital, and made speedy recoveries, being isolated for 33 and 28 days respectively. The usual steps to prevent the spread of the disease were taken, the more important being the re-vaccination and isolation of contacts, and the disinfection of the house and clothing.

In my monthly reports I have constantly endeavoured to lay stress on the prime importance of vaccination and re-vaccination as a protective against the disease, and I take this opportunity of again doing so, although one might think, after the strong object lesson which has been provided by the magnitude of the epidemic in certain districts within the West Riding, that the necessity of taking such a simple precaution as vaccination to guard against such a dread disease as small-pox would have been rendered obvious to all.

Of **Typhoid** or **Enteric Fever** cases, five occurred this year, in contrast with two in 1903, being an increase of 3 for the year. The cases were comparatively mild in character. Three were treated at home, and two in Carr House, being resident there for 37 and 65 days respectively. The houses were carefully inspected, with the result that no serious insanitary conditions were discovered. During the year a very considerable amount of flushing of the public drains and sewers has been effected, and I am convinced that a very great amount of good is produced by this simple measure. No chemical disinfectants of any kind are used. As a matter of fact, even the strongest disinfectants are of very little use for this purposes, as, whatever the substance used, it is quickly diluted by the contents of the drain, and passes away without even momentarily coming into effectual contact with the surfaces it is intended or supposed to disinfect; whereas thorough flushing in well constructed sewers and drains will do much to remove all sources of noxious and injurious substances. Systematic flushing is carried out monthly in the Winter season, and at more frequent intervals in the Summer and Autumn seasons.

Diphtheria yielded 3 cases in 1904, a decrease of 3 from 1903. Isolation being practicable, all the cases were treated at home.

From **Erysipelas** this year no cases occurred, against 1 in 1903.

Diphtheria, Typhoid Fever, and Erysipelas are frequently termed the dirt diseases, that is diseases which are frequently due to insanitary conditions which ought to be discovered and removed, so that it is gratifying to have a record of comparative freedom from such disorders, only 8 cases having occurred in 1904, in contrast with 9, 17, and 11, in the three preceding years.

Of infectious diseases not included in the Infectious Diseases (Notification) Act, a considerable number of cases of Measles and a large amount of Chicken-pox occurred within the twelve months.

ISOLATION AND DISINFECTION.

By arrangement with the Corporation of Doncaster, the Urban District of Wheatley has the right to have cases of Infectious Disease treated in either of the Infectious Disease Hospitals belonging to the former body. The Hospitals embrace an excellent Small-pox Hospital, modern in construction, and thoroughly complete, at Balby; and Carr House Hospital, for the common types of Infectious Disease. The Carr House Hospital is situated just outside the Borough, in the district of Carr House and Elmfield. The Hospital was formerly an old residential house, and, while its construction renders it somewhat costly and difficult to work, in other respects it makes a very suitable hospital for the isolation of cases of Infectious Disease. No alterations have been made at Carr House this year. The additional wards for the more severe cases of Enteric Fever, provided last year, were found of very considerable service.

Of the 17 cases of Infectious Disease which were notified during the year, 8 were removed to Hospital.

In 1903, 8 cases were treated in Hospital, but the percentage of removals to Hospital is considerably lower than last year, being only 47·0 in contrast with 67·5 in 1903.

In 1902 the percentage of patients removed to Hospital was only 35.

Of the 8 cases, 2 of Enteric Fever and 4 of Scarlet Fever were treated in Carr House Hospital, and 2 cases of Small-pox in Balby Hospital.

The average length of residence in Hospital of the discharged cases was 40·5 days, in contrast with an average residence last year of 32 days.

SURVEYOR'S AND INSPECTOR'S REPORT FOR THE YEAR 1904.

AREA.

The Parish of Wheatley has an area of 1284 Acres, of which the built-upon portion adjoins, and is to a great extent surrounded by, the Borough of Doncaster.

During the past year about 2 acres of additional building land has been laid out upon the North-east side of and facing Morley Road, and building operations are about to commence.

ROADS.

The Main Road, 93 chains in length, has been well maintained, 100 tons of metalling being obtained for the annual repairs, as against 150 tons the previous year.

At the commencement of the year the footpath adjoining the Main Road was re-gravelled for part of its length, and effected a considerable improvement.

The Outside District Roads are in good order, and the Footpath along-side Green House, in Armthorpe Lane, has been much improved.

Stanhope Road, within the building area, has been completed.

Avenue Road, which had been under consideration for several years, has been formed, drained, and paved under the direction of the Council.

BACK ROADS.

Three Back Roads, in hand at the end of last year, have been completed, and in addition three further back roads, at the rear of Beckett Road, have been undertaken and finished.

Two Back Roads, at the rear of The Holmes Market, have been completed privately.

Plans have been prepared for 2 further Back Roads between Lowther and Cranbrook Roads.

During the past 5 years, 30 Back Roads have been paved under the direction of the Council, and 7 under private auspices, making a total of 37. During the same period, 7 Main Streets or Roads have been completed.

NEW HOUSES.

There has been an increase in the number of houses erected, viz., 45, as against 32 in 1903, as follows:—

Morley Road	5	Avenue Road	2
Lockwood Road	7	Queen's Road	4
Cranbrook Road	5	Royal Avenue	18
Jubilee Road	4		

15 houses are also in course of erection. The total number of houses completed in the district is 1,089, an increase of 103 during the past 3 years.

PLANS.

12 Plans have been submitted for the consideration of the Council, including 13 new houses.

Of these, 3 were referred back and amended plans submitted and approved, and 1 rejected.

LIGHTING.

The Lighting has been improved by the addition of a further lamp in Avenue Road and two in Royal Avenue, making a total number of Lamps within the district of 73.

SEWERS AND DRAINS.

The Sewers have been flushed as required.

Three Open Manhole Covers have been closed, and three New Ventilation Shafts have been erected.

48 inspections have been made in connection with new drains.

MAINTENANCE OF PUBLIC WAYS.

The through Passage Way between Queen's Road and Chapel Street, which had been closed to the public, was re-opened by and under the direction of the Council.

ASHPITS, &c.

I am again glad to report there has been no increase in the number of privies, but on the other hand 5 existing have been converted into w.c.'s, and in addition, where 10 privies were proposed to be erected, the owner was prevailed upon to substitute w.c.'s.

12 Notifications as to Scavenging Ashpits have been made, as against 63 in 1903.

2,118 inspections after emptying Ashpits have also been made.

INFECTIOUS DISEASES.

In connection with the Notification of Infections Diseases, 16 inspections have been made, and reports upon the premises, &c., furnished to the Medical Officer. Disinfectants in each case were supplied, the drains flushed, and, where required, the Ashpits cleansed and lime-whited.

NUISANCES.

One Nuisance, after notification, was abated.

The Roads and Back Roads have been well scavenged throughout the year, the Council approving the removal of dust by this means as preferable to the use of a water cart.

Amphion House, in Avenue Road, the general drainage of which I regarded as unsatisfactory, has had its sanitary arrangements completely re-modelled by the new owner under my supervision.

The Scavenging Contractor has, upon the whole, performed his duties in a satisfactory manner, as evidenced by the fewer complaints made, and where these have been made it has not always been found upon inspection there has been blame to attach to the Contractor.

The Bell Cart refuse has increased in quantity, and has at times given the Contractor some difficulty to find a means of disposing of it.

The Council may fairly be congratulated upon the general appearance of the district, which will favourably compare both with the Borough of Doncaster and other places.

FACTORY AND WORKSHOPS ACT.

Under this heading, 22 inspections have been made, as follows :—

3 Dressmakers' Workrooms	...	...	...	...	6
3 Bakehouses	...	...	...	...	8
1 Sugar Boiling Works	...	...	...	...	2
2 Joiners' Shops	...	...	...	...	4
1 Laundry	...	...	...	...	2

Improvements as to space and lighting have been made in connection with 2 Dressmakers' Rooms.

Recommendations as to paving have been carried out as regards one Bakehouse, and as to want of cleanliness in the case of another received immediate attention.

A suggestion as to improving the Sanitary accommodation at the Sugar Boiling Works was promptly carried out, and the drainage also improved.

COW-SHEDS, DAIRIES, AND MILK-SHOPS.

There is one Cow-Shed in the district off Thorne Road, in connection with a Dairy in the Borough of Doncaster. Only 2 or 3 cows are kept.

There were two Purveyors of Milk, one being in quite a small way of business, and the other carried on under the name of "The Wheatley Dairies," doing about 13 gallons per day. The first named discontinued business recently.

JOHN SIMMONS, M. Inst. C.E.,

SURVEYOR.

Bank Chambers, Doncaster,
January, 1905.

TABLE I.

Vital Statistics of Whole District during 1904 and previous Years.

WHEATLEY.

Year.	Population estimated to middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.				Total Deaths in Public Institutions in the District.	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents registered in public Institutions beyond the District.	Nett Deaths at all Ages belonging the district.	
		Num-ber.	Rate*	Under 1 Year of Age.		At all Ages.					Num-ber.	Rate.*
				Num-ber.	Rate per 1,000 Births regist'd	Num-ber.	Rate.*					
1895.	2,551	66	25·5	9	136	34	13·3	—	—	—	34	13·3
1896.	2,729	80	29·3	8	100	28	10·2	—	—	—	28	10·2
1897.	2,907	94	32·3	15	159	39	13·4	—	—	—	39	13·4
1898.	3,085	103	33·3	12	116	28	9·1	—	—	—	28	9·1
1899.	3,263	104	31·8	18	173	41	12·5	—	—	—	41	12·5
1900.	3,441	119	34·5	22	185	47	13·6	—	2	2	47	13·6
1901.	3,623	117	32·3	18	171	40	11·0	—	—	—	40	11·0
1902.	3,800	106	27·9	5	47	34	8·9	—	—	5	39	10·2
1903.	3,980	126	31·6	18	142·8	46	11·5	—	—	4	50	12·6
Averages for years 1895-1903	3,264	101	30·9	13	136·6	37	11·5	—	·2	1·2	38	11·7
1904.	4,158	106	25·4	11	103·7	40	9·6	—	—	2	42	10·1

* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.
 Total population at all ages, 3,579 at Census of 1901.
 Area of District, exclusive of area covered by water, 1,276 acres.
 Institutions within the District receiving sick and infirm persons from outside the District, none.
 Institutions outside the District receiving sick and infirm persons from the District:—Doncaster Infirmary, Carr House Hospital, Balby Hospital, Union Workhouse, and Wadsley Asylum.
 Is the Union Workhouse within the District? No.

TABLE II.
 Cases of Infectious Disease notified during the Year 1904.
WHEATLEY.

Notifiable Disease.	CASES NOTIFIED IN WHOLE DISTRICT.								No. of Cases removed to Hospital from each locality.
	At all Ages.	At Ages †—Years.							
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.		
Small-pox	2	...	...	...	1	1	...	2	
Cholera	...	...	...	...	...	...	...	...	
Diphtheria	2	...	...	2	...	...	...	...	
Membranous Croup ...	1	...	...	1	...	...	...	...	
Erysipelas	...	...	...	...	...	...	...	...	
Scarlet Fever	7	...	2	4	1	...	...	4	
Typhus Fever	...	...	...	...	...	...	...	...	
Enteric Fever	5	...	...	3	1	1	...	2	
Relapsing Fever	...	...	...	...	...	...	...	...	
Continued Fever	...	...	...	...	...	...	...	...	
Puerperal Fever	...	...	...	...	...	...	...	...	
Plague	...	...	...	...	...	...	...	...	
*	...	...	...	...	...	...	...	...	
Totals	17	...	2	10	3	2	...	8	

*Isolation Hospital and Small-pox Hospital, at Balby.
 Infectious Diseases Hospital, at Carr House and Elmfield.*

TABLE III.
 Causes of, and Ages at, Death during the Year 1904.
WHEATLEY.

CAUSES OF DEATH.							Deaths, at the subjoined ages, of Residents, whether occurring in or beyond the District.						
							All Ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and up-wards.
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	1	1	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping-cough	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria and Membranous Croup	...	...	...	...	...	...	...	...	...	...	...	...	...
Croup	...	...	...	...	...	...	...	...	...	...	...	...	...
Fever	Typhus	...	...	...	...	...	...	...	...	...	...	...	...
	Enteric	...	...	...	...	...	...	...	...	...	...	...	...
	Other continued	...	...	...	...	...	...	...	...	...	...	...	...
Epidemic Influenza	...	...	...	...	...	...	1	...	...	...	...	...	1
Cholera	...	...	...	...	...	...	...	...	...	...	...	...	...
Plague	...	...	...	...	...	...	...	...	...	...	...	...	...
Diarrhoea	...	...	...	...	...	...	2	2	...	...	...	...	...
Enteritis	...	...	...	...	...	...	3	3	...	...	...	...	...
Puerperal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Sceptic Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...
Phthisis	...	...	...	...	...	...	2	...	...	1	...	1	...
Other Tubercular Diseases	...	...	...	...	...	...	2	...	2	...	...	...	...
Cancer, malignant disease	...	...	...	...	...	...	3	...	...	...	...	3	...
Bronchitis	...	...	...	...	...	...	4	...	1	...	...	2	1
Pneumonia	...	...	...	...	...	...	...	...	...	...	...	...	...
Pleurisy	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Diseases of Respiratory Organs	...	...	...	...	...	...	...	...	...	...	...	...	...
Alcoholism	}	...	...	...	...	...	...	...	...	...	...	...	...
Cirrhosis of Liver		...	...	...	...	...	...	...	...	...	...	...	...
Venereal Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...
Premature Birth	...	...	...	...	...	...	2	2	...	...	...	...	...
Diseases and Accidents of Parturition	...	...	...	...	...	...	...	...	...	...	...	...	...
Heart Diseases	...	...	...	...	...	...	7	...	...	...	...	2	5
Accidents	...	...	...	...	...	...	...	...	...	...	...	...	...
Suicides	...	...	...	...	...	...	...	...	...	...	...	...	...
All other causes	...	...	...	...	...	...	15	3	...	1	1	5	5
All Causes	...	...	...	...	...	...	42	11	3	2	1	13	12